

**FORM B Originally-Qualifying Information of Union**

**THE LABOUR RELATIONS ACT  
THE MANITOBA LABOUR BOARD**

Full name of local union: \_\_\_\_\_

Address: \_\_\_\_\_

If a local branch of a parent union, state whether union is

International? \_\_\_\_\_ National? \_\_\_\_\_ or Provincial? \_\_\_\_\_

Full name of parent union: \_\_\_\_\_

Address of parent union: \_\_\_\_\_

Date of issue of local union's charter: \_\_\_\_\_

Names and addresses of principal office-holders:

Name Address

President:

Vice-President:

Secretary:

Treasurer:

Business Agent:

- ATTACH:   1. Copy of Constitution.  
          2. Copy of General By-laws.  
          3. Copy of local union's charter.  
          4. Copy of local union's general by-laws.

(Original charter is to be produced so that Board Officer will be able to certify that he has compared it with copy and found the copy correct).

I \_\_\_\_\_ secretary of the above-named local union hereby certify the correctness of the documents and of the information now filed.

\_\_\_\_\_  
Secretary